

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach to the back of the mailpiece,  
or \_\_\_\_\_  
Please print your name, address, and \_\_\_\_\_

1.

**SHIP TO:**

THE SWAFFORD LAW FIRM, PLLC  
TARA L SWAFFORD ESQ  
207 3RD AVE N  
FRANKLIN TN 37064-2504



9590 9402 5035 9092 3259 46

2. Article Number (Transfer from service label)

4414 71110 8274808959

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

ROSELL BROWN

7/16

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

C-9

## 3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

**USPS TRACKING#**



9590 9402 5035 9092 3259 46



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

**United States  
Postal Service**

• Sender: F

ZIP+4® in this box®

LAW OFFICES OF ROLAND MUMFORD  
ROLAND MUMFORD  
242 W MAIN ST  
#223  
HENDERSONVILLE TN 37075